

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Olson for Congress Committee

Full Name (Last, First, Middle Initial)

A. Lilly & Company

Mailing Address 1005 Congress Ave Ste 910

City	State	Zip Code
Austin	TX	78701-2467

Purpose of Disbursement
NOTE: See below

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2015

Amount of Each Disbursement this Period

7470.19

Transaction ID : B931DA26E42E04F08B51

B. Lilly & Company

Mailing Address 1005 Congress Ave Ste 910

City	State	Zip Code
Austin	TX	78701-2467

Purpose of Disbursement
Fundraiser expense / Sales tax 2/28

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2015

Amount of Each Disbursement this Period

300.80

Transaction ID : BC1EC0FB4003641CE932

[MEMO ITEM]

c. Lilly & Company

Mailing Address 1005 Congress Ave Ste 910

City	State	Zip Code
Austin	TX	78701-2467

Purpose of Disbursement
Fundraising consultant 2/28

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2015

Amount of Each Disbursement this Period

2000.00

Transaction ID : BE8644C1130764074B0D

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

7470.19